A Quick Guide

to Common Childhood Diseases

BRITISH COLUMBIA

Ministry of Health and
Ministry Responsible for Seniors

Canadian Cataloguing in Publication Data
British Columbia. Community Care Facilities Branch.
A Quick Guide to Common Childhood Diseases

ISBN 0-7726-7648-8

Table of Contents

Introduction 1

How to reduce or prevent the spread of communicable disease 2

Diseases spread by person-to-person contact 3

- Chicken Pox 3
- Fifth Disease 3
- Hand/Mouth/Foot Disease 4
- Herpes 4
- Impetigo 5
- Influenza 5
- Measles 6
- Meningococcal Meningitis 6
- Mononucleosis 7
- Mumps 7
- Pertussis 8
- Pink Eye 8
- Roseola Infantum 9
- Rubella 9
- Rubeola 9
- RSV 10
- Shingles 10
- Streptococcal 11

Gastrointestinal (stomach or bowel) infections 12

- Campylobacter 12
- Cryptosporidiosis 12
- Escherichia Coli (E. coli) 13
- Giardiasis 14
- Hemolytic Uremic Syndrome (HUS) 14
- Pinworms 15
- Salmonellosis 15

Skin Conditions and infestations 16

- Lice 16
- Ringworm 16
- Scabies 17
- Swimmer's Itch 17

References 18

This booklet may be viewed on the Ministry of Health's Internet site, at:
http://www.hlth.gov.bc.ca/prevent/phn.html

105-05823/

Introduction

This booklet is for people who care for groups of young children. This includes child care, school, summer camp, and anywhere else that groups of young children spend time together.

When children work and play together in groups, this environment provides an opportunity for the spread of a number of common childhood diseases that can be passed on from one child to the next. It is important that these diseases be prevented or, if they do occur, that they are recognized quickly and steps taken to stop them from spreading.

Because this booklet deals with nearly 30 diseases, the information about each disease is necessarily limited. The intent of this booklet is to provide those working with children in groups with a quick reference to help them identify common, communicable diseases, and take appropriate measures to make sure these diseases are not spread to others.

For this purpose, each disease in this booklet is described according to:

- *Symptoms* (how to identify that particular disease);
- *Method of Spread* (how the disease is passed from one child to the next);
- *Incubation* (how long it takes from when the child is first infected to when the first symptoms appear);
- *Communicable Period* (how long an infected child is able to spread the disease to others);
- *Control* (how to stop the spread of the illness to others); plus suggested treatments and preventive measures.

More detailed information about these and other diseases can be found in the Health Files – a series of fact sheets about public and environmental health issues – which is available from all public health offices. The Health Files are also on the Internet, at http://www.hlth.gov.bc.ca/hlthfile/index.html. Recorded versions of the Health Files are available at 1-877-660-2628 (or 660-2628 for Greater Vancouver). They are also available through the Ministry's toll-free information line (1-800-465-4911, or 952-1742 in the Greater Victoria area).

A booklet has also been prepared specially for child care facility operators – Preventing Illness in Child Care Settings – which shows how to design and implement health and illness policies to guide decision-making about children who are ill. This booklet is also available from your local public health authorities.

The spread of communicable disease can be reduced or prevented by observing some simple precautions:

1. Practice good personal hygiene, including washing hands carefully after toileting, sneezing and coughing, after touching pets and animals, and before food preparation. Cover mouth and nose when sneezing and coughing. Dispose of articles soiled with discharge from nose and/or mouth.

2. When antibiotics are prescribed by a physician, take the complete prescription. This will decrease the chance of bacteria becoming resistant to antibiotics. Antibiotics are ineffective against viral infections.

3. If you are taking your child to the emergency department or doctors office, call first to inform them if you suspect your child has chicken pox, pertussis, influenza or measles. This will reduce the transmission of a potentially highly contagious or airborne communicable disease.

4. Practice good hygiene when preparing, storing and disposing of food. Wash hands before any preparation. Clean surfaces before and after preparing food. Cover food and store at recommended temperatures for recommended times.

Diseases Spread by Person-to-Person Contact

Chickenpox (varicella-zoster virus)

Symptoms	Sudden onset with slight fever. Blister-type rash occurs in successive crops. Scabs form after the blister stage. Spots or blisters usually appear first on the body, face and scalp, then later spread to the limbs.
Method of Spread	Spread by sneezing and coughing. Direct contact with secretions from nose, throat and mouth of infected people.
Incubation	Usually 14 - 21 days from date of contact.
Communicable Period	From 2 days before spots appear to 5 days after the first crop of blisters.
Control	Exclude from school when spots first appear until 5 days after onset.
Suggested Treatment	Control fever with acetaminophen. Do not use ASA or Aspirin. Cut fingernails short to prevent scratching. Calamine lotion, baking soda paste or tepid baths with oatmeal or baking soda may help to relieve itching. Antihistamines may also reduce itching.
Prevention	A vaccine is now available. Prevent contact with pregnant women or people whose immunity may be reduced due to disease or drug/ radiation therapy. Those with reduced immune response who are exposed should contact their physician immediately. . Contact your local Health Unit for information. See Health File #44.

Fifth Disease (Human Parvovirus)

Symptoms	Raised, red, warm rash, first appearing on cheeks (slapped cheek appearance). After 1 - 4 days, a lace-like rash spreads to the rest of the body. Rash fades but may recur for 1 - 3 weeks on exposure to sunlight.
Method of Spread	Contact with infected respiratory secretions; also from mother to fetus.
Incubation	4 - 20 days from date of contact.
Communicable Period	Greatest before onset of the rash and probably not after the rash.
Control	In school outbreaks, alert pregnant staff. Careful hand-washing and disposal of articles soiled with nose and throat secretions. See Health File #54.

Hand / Foot / Mouth Disease (Coxsackie virus)

Symptoms	Sudden onset. Fever, sore throat, small greyish blisters in mouth lasting 4 - 6 days. Blisters may also appear on palms, fingers and soles for 7 - 10 days.
Method of Spread	Spread by coughing and sneezing. Direct contact with nose and throat secretions and feces of infected persons.
Incubation	3 - 5 days from date of contact.
Communicable Period	While sick and sometimes longer.
Control	Avoid close contact. Careful disposal of articles soiled with discharge. Careful hand-washing, especially after toileting. Isolation of case and children with fever, pending diagnosis.
Suggested Treatment	Control fever with acetaminophen.
Prevention	Promote hand-washing and hygiene measures in home and particularly in daycares. See Health File #64.

Herpes "cold sores" (virus)

Symptoms	Superficial clear vesicles (blisters) with red base, usually on face or lips, which crust and heal within days.
Method of Spread	Direct contact with secretions from throat and mouth of infected people.
Incubation	2 - 12 days from date of contact.
Communicable Period	Up to 7 weeks after onset.
Control	Avoid direct contact with secretions or infectious materials.
Suggested Treatment	For severe cases, see physician.
Prevention	Education to minimize transmission of infectious material, avoid contact with children with eczema or burns and the immunocompromised.

Impetigo (may be staphylococcal or streptococcal bacteria)

Symptoms	A skin infection with moist, purulent, yellow crusted sores surrounded by redness. Spreads forming new sores. Usually found on the face.
Method of Spread	Direct contact with secretions from open sores and nose. Can also be spread person-to-person via hands.
Incubation	Staphylococcal: 4 - 10 days from date of contact. Streptococcal: 1 - 3 days from date of contact.
Communicable Period	If untreated, as long as sores are present, or 24 hours after antibiotic therapy has been started.
Control	Avoid close contact with infants and debilitated people. Keep out of school or daycare for 24 hours after start of antibiotics. Wash clothes and linens. Provide separate towels and soap.
Suggested Treatment	See physician for antibiotic therapy.
Prevention	Keep affected areas clean and covered, if wet. Encourage children not to touch sores. Keep nails short and clean. Wash hands frequently. Avoid sharing toilet articles.

Influenza (virus)

Symptoms	Fever, headache, muscular aches and pains, exhaustion, running nose, sore throat. Sometimes nausea, vomiting, diarrhea, but this is more common in children.
Method of Spread	Spread by sneezing and coughing, particularly in crowded conditions, and by direct contact with nose and throat secretions.
Incubation	Usually 1 - 3 days from date of contact.
Communicable Period	Probably 3 - 5 days in adults, up to 7 days for young children.
Control	Avoid crowded areas. Carefully dispose of tissues.
Suggested Treatment	See physician.
Prevention	Annual flu vaccine if you are 65 or older, if you are at high risk, if you are a household contact of a person who is at high risk for complications from influenza or if you are a health care worker or first responder. Good basic personal hygiene (e.g., hand-washing and covering mouth and nose when sneezing). See Health File #12b.

Measles "red measles" (Rubeola virus)

Symptoms	Fever, inflamed eyes, dry cough, runny nose, dusky red blotchy rash 3 - 7 days later spreading downwards from face, white spots in mouth. Confirm with blood test.
Method of Spread	Spread by sneezing or coughing, or by direct contact with nose and throat secretions. Highly contagious.
Incubation	7 - 18 days from exposure to onset of fever, usually 14 days until rash appears.
Communicable Period	From just before the symptoms start to 4 days after the rash appears.
Control	Exclude from school and non-family contacts until 4 days after rash appears. Immunize susceptible contacts. Immune globulin available for infants under 1 year, immuno-compromised people, and those who can not have the vaccine due to medical reasons.
Suggested Treatment	See physician. Notify health unit. Control fever, encourage fluids, dim lights or wear sunglasses if eyes are sensitive to light.
Prevention	2 doses of measles vaccine (age 12 months and 18 months). See Health Files #14a and 14b.

Meningococcal Meningitis (bacteria)

Symptoms	Sudden onset with fever, intense headache, nausea, vomiting, stiff neck, and often a pinpoint rash. Confirm with test of blood and cerebral spinal fluid (CSF).
Method of Spread	Spread by direct contact with nose and throat secretions.
Incubation	2 - 10 days from exposure to onset of fever, usually 14 days until rash appears.
Communicable Period	Until 24 hours after start of appropriate antibiotic therapy.
Control	See physician immediately. Monitor household and other close contacts for symptoms. Antibiotics are provided for those at increased risk. Special attention should be paid to young children in daycare.
Suggested Treatment	Hospitalization. Appropriate antibiotic therapy. Notify health unit.
Prevention	Immunization during outbreaks, where appropriate. See Health File #23.

Mononucleosis (Epstein-Barr virus)

Symptoms	Acute fever, sore throat, swollen glands, tiredness.
Method of Spread	Person-to-person spread via saliva, or articles contaminated with saliva.
Incubation	4 - 6 weeks from date of contact.
Communicable Period	Prolonged.
Control	Careful hand-washing, careful disposal of articles soiled with nose and throat discharges.
Suggested Treatment	See physician. Promote rest, increase fluids, good nutrition. Control fever.
Prevention	Good hygiene, careful hand-washing.

Mumps (virus)

Symptoms	Fever, headache and inflammation of the salivary glands causing the cheeks to swell painfully. Sometimes there is no swelling.
Method of Spread	Spread by sneezing or coughing, or by direct contact with nose and throat secretions.
Incubation	Usually 16 - 18 days from date of contact.
Communicable Period	From 7 days before onset of swelling to 9 days after. Most infectious 2 days before onset of illness.
Control	Exclude from school, daycare and workplace until 9 days after onset of swelling, if there are susceptibles. Immunize susceptibles.
Suggested Treatment	Notify health unit.
Prevention	Measles, mumps, rubella vaccine (given at age 12 months and 18 months). See Health File #14.

Pertussis "Whooping cough" (bacteria)

Symptoms	Runny nose, repeated violent coughing followed by characteristic whoop, sometimes followed by vomiting. Confirm with lab test (swab).
Method of Spread	Direct contact with nose and throat secretions of infected people, also by sneezing and coughing.
Incubation	6 - 20 days from date of contact.
Communicable Period	Highly communicable in the early stages before the cough, and for about 3 weeks after. Not infectious after 5 days antibiotic therapy.
Control	Keep away from young children and infants. Ensure contacts under age 7 complete immunization series. Antibiotics offered for household and close contacts. Carefully dispose of contaminated tissues.
Suggested Treatment	See physician. Antibiotic treatment. Notify health unit. See Health File #15a and 15b.
Prevention	Age-appropriate immunization.

Pink Eye

Symptoms	Teary, red, irritated itchy eyes with swollen lids and thick yellow discharge. Sensitive to sunlight.
Method of Spread	Contact with discharge from eyes and nose of infected persons, often through contaminated fingers, make-up applicators, eye droppers, etc.
Incubation	1 - 3 days from date of contact.
Communicable Period	During active infection. Young children and the aged are more susceptible.
Control	If there is a thick white or yellow discharge (often with eyelids stuck together, or crusted eyelashes), fever, eye pain or eyelid redness, the child should not attend school or day care, and should be seen by a doctor. The doctor can advise if the child can return to school or daycare, or should stay home (usually for 1 to 3 days). The child may be asked to stay home until an antibiotic has been taken for a full day, or the symptoms (discharge, pain) get better.
Suggested Treatment	See physician. Avoid touching eyes, and wash hands often.
Prevention	Promote good personal hygiene and careful hand-washing. Keep hands away from eyes. Do not share towels or bed linen, or toys that are held close to the face.

Roseola Infantum "Sixth Disease" (virus)

Symptoms	Fever appears suddenly, lasting 3 - 4 days, followed by a raised red rash on the trunk, later spreading to the rest of the body, lasting 1 - 2 days. Most common in infants and pre-schoolers.
Method of Spread	Unknown.
Incubation	5 - 15 days from date of contact.
Communicable Period	Probably greatest during fever, before rash appears.
Control	Avoid contact with other children.
Suggested Treatment	Control fever with acetaminophen.
Prevention	None.

Rubella "German measles" (virus)

Symptoms	Often but not always, a slightly raised, red pinpoint rash, spreading from behind the ears to the face and downwards. Children usually have few symptoms, but adults may have fever, headache, joint pain, tiredness, runny nose and inflammation of eyes. Confirm with blood test.
Method of Spread	Spread by sneezing or coughing, or by direct contact with secretions from nose and throat of infected person.
Incubation	14 - 23 days from date of contact.
Communicable Period	1 week before and at least 4 days after onset of rash. Infants with congenital rubella may be infectious for months after birth.
Control	Keep home for 7 days after onset of rash. Pregnant contacts should have blood test done to test for susceptibility.
Suggested Treatment	Control fever. See physician. Notify health unit.
Prevention	MMR immunization. Prevent contact with non-immune pregnant women, especially those in their first 3 months of pregnancy. See Health Files #14a.

Rubeola: see Measles

RSV (Respiratory Syncytial virus)

Symptoms	Fever, chills, headache, general malaise, respiratory tract symptoms.
Method of Spread	Direct contact with infected respiratory secretions, and through food and water contaminated with feces.
Incubation	1 - 10 days from date of contact.
Communicable Period	Just prior to and until the end of the active disease.
Control	Practice good personal hygiene, wash hands carefully before preparing food, avoid contact with young children, debilitated or aged people, or patients with other illnesses.
Suggested Treatment	Symptomatic treatment. Do not use antibiotics, cold medicines, antihistamines or decongestants. Drink plenty of fluids.
Prevention	Promote good personal hygiene and hand-washing.

Shingles (varicella-zoster virus)

Symptoms	Blister-type rash along nerve pathway, pain, and paresthesia (numbness or tingling sensation).
Method of Spread	Reactivation of chickenpox at nerve site. Direct contact with fluid from vesicles (blisters) may spread chickenpox to those who have not had the disease.
Incubation	Usually 14 - 21 days from date of contact.
Communicable Period	From 2 days before lesions appear and up to 7 days after.
Control	No need to exclude from school if the rash is well-covered and the person is feeling well.
Suggested Treatment	See physician for appropriate drug therapy.
Prevention	Prevent contact with pregnant women or people whose immunity may be reduced due to disease or drug/ radiation therapy. See Health File #44.

Streptococcal (bacteria)

a) Scarlet Fever

Symptoms	Sandpaper-like rash, blanching on pressure. Strawberry-like tongue. Sometimes fever, nausea, vomiting, sore throat, headache. During recovery skin on hands and feet may peel.
Method of Spread	Close contact with patient or carriers.
Incubation	1 - 3 days from date of contact.
Communicable Period	If untreated, 10 - 21 days or longer. 24 hours after start of antibiotic therapy.
Control	Stay at home as long as directed by physician. Exclude case from food-handling occupations. Careful disposal of tissues soiled with nose and throat discharges.
Suggested Treatment	See physician for antibiotic treatment therapy. Ensure full course of antibiotics to prevent rheumatic heart disease. Control fever with acetaminophen.
Prevention	Careful hand-washing and food-handling.

b) Strep Throat

Symptoms	Fever, very sore throat, swollen glands, pustular tonsils. Confirm with throat culture.
Method of Spread	Close contact with patient or carriers.
Incubation	1 - 3 days from date of contact.
Communicable Period	If untreated, several weeks or months. With antibiotic therapy, 24 hours.

Gastrointestinal (Stomach or Bowel) **Infections**

Campylobacter (bacteria)

Symptoms	Abdominal pain, diarrhea, fever, nausea, vomiting, malaise. Symptoms usually pass in 2 - 5 days. Confirm by stool specimen.
Method of Spread	Ingesting contaminated food or unpasteurized (raw) milk, or contact with feces of infected people, particularly infants, or animals, especially kittens and puppies.
Incubation	Usually 1 - 10 days from date of contact.
Communicable Period	During course of infection or sometimes longer.
Control	Exclude from food-handling occupations, daycare, and patient care in hospitals while sick. Promote careful hand-washing.
Suggested Treatment	See physician. Notify health unit. Drink plenty of fluids.
Prevention	Careful food-handling and cooking of food from animal sources. Pasteurize milk. Wash hands carefully after handling poultry. See Health File #58.

Cryptosporidiosis (parasite)

Symptoms	Major symptom is diarrhea, which may be profuse and watery, as well as cramps, vomiting in children. Fever, general malaise, nausea and vomiting less often.
Method of Spread	Contaminated water supply, person-to-person from fecal contamination, also spread from animals to children (e.g., petting animals then hand-to-mouth transfer).
Incubation	Usually 1 - 12 days from date of contact, with an average of 7 days.
Communicable Period	During course of infection or sometimes longer. Cysts remain viable for 2 - 6 months in a moist environment.
Control	Wash hands thoroughly after toileting, and in particular children should wash hands after petting animals.
Suggested Treatment	See physician for appropriate treatment. Rehydration where necessary. Notify health unit.
Prevention	Promote good personal hygiene and hand-washing. Boil water from unsafe sources for 2 minutes before consuming. See Health File #48.

Escherichia Coli "E. coli"

Symptoms	Early symptoms include loose or watery diarrhea, with or without blood or mucus. Mild to severe stomach cramps. Possible vomiting. Possible fever. Later symptoms (depending on strain of E. coli) may include dehydration, irritability and fatigue, paleness of skin and decrease in urine output — all of which may indicate the onset of hemolytic uremic syndrome (HUS) (see below).
Method of Spread	Eating contaminated food, particularly under-cooked hamburger, or contact with feces of infected people or animals. May also be spread by eating raw fruits and vegetables or drinking unpasteurized milk or juices. Drinking water can also be a method of spread, if contaminated by infected meat or feces.
Incubation	As short as 12 hours from date of contact, but up to 5 days. Usually 2 - 4 days.
Communicable Period	For duration of diarrhea, and sometimes longer — up to 3 weeks for children.
Control	Promote careful hand-washing before handling food and after changing diapers or using toilet. Drink only pasteurized milk and juice products. Refrigerate and cook meat thoroughly, particularly ground meat. Wash fruits and vegetables well before eating.
Suggested Treatment	See physician for appropriate tests and treatment. Notify health unit. Drink plenty of fluids during diarrhea episodes. Note: HUS is a very serious illness, requiring hospital intensive care. If the later symptoms listed above develop, seek medical attention immediately.
Prevention	Promote safe food-handling and preparation, including proper refrigeration and cooking (see Health File #59). Do not drink unpasteurized milk or juice. Practice frequent hand-washing and good personal hygiene. Avoid diapering and food preparation in the same area. Protect drinking water supplies. See Health File #2.

Giardiasis "Beaver fever" (parasite)

Symptoms	Sometimes no symptoms, but may have chronic diarrhea, abdominal cramps, bloating, fatigue, weight loss. Confirm by stool specimen.
Method of Spread	Contaminated water supply. Person-to-person by hand-to-mouth transfer of cysts, especially in institutions and daycares.
Incubation	3 - 25 days from date of contact.
Communicable Period	During entire period of infection.
Control	Wash hands carefully after toileting. Investigate source of infection.
Suggested Treatment	See physician for appropriate drug therapy. Notify health unit.
Prevention	Promote good personal hygiene and hand-washing. Protect water supplies. Careful disposal of sewage. See Health File #10.

Hemolytic Uremic Syndrome (HUS)

Symptoms	Early symptoms (from E. coli infection) are diarrhea with blood, vomiting, and stomach cramps. May develop fever. Later symptoms include irritability and fatigue, dehydration, pale skin (anemia), and reduced urine production.
Method of Spread	The organism (E. coli 0157:H7, which can lead to HUS in a small percentage of those infected with E. coli) is spread by person-to-person contact, or by eating contaminated foods (see E. coli, above). Can also occur from contact with person infected with Shigella dysenteria.
Incubation	E. coli incubation usually takes 3 - 4 days from date of contact. HUS usually develops within 1 - 2 weeks of diarrheal onset.
Communicable Period	HUS cannot be spread from person-to-person. However, the organism (E. coli) which causes the syndrome can be spread by poor hand-washing or improper food-handling (see E. coli, above).
Control	Control is the same as for E. coli (see above).
Suggested Treatment	HUS requires the immediate attention of a physician. This illness is very serious, with death resulting in a small number of cases (3 - 5 percent). HUS is caused by a toxin which breaks down blood cells, leading to anemia, a bleeding tendency (due to loss of platelets in the blood) and acute kidney failure.
Prevention	The same as with E. coli. See Health File #2.

Pinworms (parasite)

Symptoms	Itching of the anal area, restless sleep, irritability, occasionally secondary infection of scratches. Adult worms may be observed in the anal area.
Method of Spread	Infective eggs are in feces and get into mouth via unwashed hands.
Incubation	Life cycle is 2 - 6 weeks from date of contact.
Communicable Period	As long as eggs are produced by adult worms. Eggs may remain infective in the environment for about 2 weeks.
Control	See physician for drug treatment. Change and wash underwear and bed linen daily. Clean and vacuum living areas daily for a few days following treatment.
Suggested Treatment	May need to treat the whole family at the same time. Keep nails short. Shower daily.
Prevention	Promote good personal hygiene and careful hand-washing before eating and preparing food. Maintain clean toilet facilities.

Salmonellosis (bacteria)

Symptoms	Sudden onset, headache, abdominal cramps, nausea, vomiting, diarrhea, fever. Confirm with stool specimen.
Method of Spread	Eating contaminated food, undercooked food, raw eggs and milk, meat and poultry. May also be spread by pet turtles, chicks, ducklings or fecal-oral transmission.
Incubation	6 - 72 hours from date of contact.
Communicable Period	Throughout the course of infection.
Control	Exclude cases from occupations involving food-handling, daycare and care of hospitalized, elderly and immunocompromised persons while sick and until stool tests normal. Consider stool cultures for any contacts in similar occupations.
Suggested Treatment	Control fever. Encourage fluids. See physician. Notify health unit.
Prevention	Thoroughly cook all food from animal sources. Refrigerate prepared foods. Educate food handlers. Promote careful hand-washing. See Health File #17.

Lice Head Lice Pediculosis (insect)

Symptoms	Small white eggs (nits), firmly attached to hair shaft especially around ears and nape of neck. Itchiness. Grey-white, sometimes brown, adult lice. 1 - 2 mm long.
Method of Spread	Direct contact with infested people and articles (i.e., combs, hairbrushes).
Incubation	Nits hatch in 7 days from date of contact, and reach maturity 8 - 10 days later.
Communicable Period	Until all lice and nits are destroyed or removed from scalp.
Control	Lice shampoo and nit removal. Check family members and other close contacts. Provide information and education to daycare and school children and their parents.
Suggested Treatment	Treat the case with special shampoo/rinse available at drug store. Follow package directions carefully. Remove nits. Wash clothes and linens in hot water, or dry clean. Re-treat in 7 - 10 days.
Prevention	Check young children routinely. Do not borrow or share combs, hair accessories or other head gear. See Health File #6.

Ringworm (fungus)

Symptoms	Ring-shaped patches of temporary baldness, with small yellowish crusts. Examination under UV light (Wood's lamp) shows yellow-green fluorescence.
Method of Spread	Direct skin-to-skin contact. Also indirectly through contact with articles contaminated by infected people or animals.
Incubation	10 - 14 days from date of contact.
Communicable Period	As long as active infection is present.
Control	Look for sources of infection, particularly in pets, farm animals and household contacts. Launder clothes and linens.
Suggested Treatment	See physician for appropriate medication. Wash affected areas daily and keep clean and dry. Notify health unit when several cases appear in groups of children.
Prevention	Good personal hygiene.

Scabies (mite)

Symptoms	Tiny blisters or burrow lines in skin, often seen in skin folds between fingers, wrists, elbows, thigh and abdomen. Intense itching, particularly at night.
Method of Spread	Direct skin-to-skin contact with infested people.
Incubation	2 - 6 weeks from date of contact before itching appears. If previously exposed, itching may occur in 1 - 4 days.
Communicable Period	Until mites and eggs are destroyed with appropriate treatment.
Control	Exclude from school or work until day after treatment.
Suggested Treatment	Launder linen and clothes in hot water, or isolate them for 4 days. Purchase special lotion from drug store and follow directions carefully. Treat all family members simultaneously. Itching may last 1 - 2 weeks after treatment. Antihistamines may help relieve itching. Cut fingernails and wash hands carefully to prevent secondary infections.
Prevention	Education about scabies. Good personal hygiene, frequent bathing and washing of clothes and linens. See Health File #9.

Swimmer's Itch (parasite)

Symptoms	Mild skin irritation and very severe, itchy red rash.
Method of Spread	From contact with larval parasites in water during swimming or wading. Parasite larvae originate from infected water snails.
Incubation	Itching begins almost immediately, and may last 2 - 5 days and up to 2 weeks.
Communicable Period	Not communicable from person to person. In chronic cases, eggs may be passed from a human's urine or feces into bodies of water.
Control	No specific control measures.
Suggested Treatment	Avoid scratching. Can use calamine, antihistamines, lukewarm baths with baking soda, apply cool compresses.
Prevention	Apply waterproof sunscreen prior to swimming. Towel-dry right after leaving the water. Ideally, shower immediately after swimming, then towel-dry. See Health File #52.

References

British Columbia, Ministry of Health
Communicable Disease Control Policy.

Chin, James. ed.,
Control of Communicable Diseases Manual
17th edition, American Public Health Association 2000.

Mott, S.R., James, S.R., Sperhac, A.M.,
Nursing Care of Children and Families
2nd edition, Addison Wesley, 1990.

Report of the Committee on Infectious Diseases, 2000 Red Book,
American Academy of Pediatrics, 2000

This booklet may be viewed on the Ministry of Health's Internet site, at:
http://www.hlth.gov.bc.ca/prevent/phn.html

PHN 144
012.SI.PH.014.0069
Rev. 05/2001

Health Printing Services